

County: Polk
ST CROIX VALLEY GOOD SAMARITAN
750 LOUISIANA EAST

Facility ID: 8340

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ST CROIX FALLS 54024 Phone: (715) 483-9815
Operated from 1/1 To 12/31 Days of Operation: 365
Operate in Conjunction with Hospital? No
Number of Beds Set Up and Staffed (12/31/03): 91
Total Licensed Bed Capacity (12/31/03): 91
Number of Residents on 12/31/03: 81

Ownership: Non-Profit Corporation
Highest Level License: Skilled
Operate in Conjunction with CBRF? No
Title 18 (Medicare) Certified? Yes
Title 19 (Medicaid) Certified? Yes
Average Daily Census: 84

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/03)				Length of Stay (12/31/03)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		18.5
Supp. Home Care-Personal Care	No					1 - 4 Years		37.0
Supp. Home Care-Household Services	No	Developmental Disabilities	2.5	Under 65	7.4	More Than 4 Years		18.5
Day Services	No	Mental Illness (Org./Psy)	7.4	65 - 74	7.4			----
Respite Care	No	Mental Illness (Other)	11.1	75 - 84	27.2			74.1
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	51.9	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	6.2	Full-Time Equivalent		
Congregate Meals	Yes	Cancer	4.9		----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	17.3		100.0	(12/31/03)		
Other Meals	No	Cardiovascular	23.5	65 & Over	92.6	-----		
Transportation	No	Cerebrovascular	18.5	-----		RNs		13.7
Referral Service	No	Diabetes	4.9	Gender	%	LPNs		8.2
Other Services	No	Respiratory	2.5	-----		Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	7.4	Male	30.9	Aides, & Orderlies		
Mentally Ill	No		----	Female	69.1			
Provide Day Programming for			100.0		----			
Developmentally Disabled	No				100.0			

Method of Reimbursement

		Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care			Managed Care				
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	% Of All	
Int. Skilled Care	0	0.0	0	2	3.8	132	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	2	2.5	
Skilled Care	7	100.0	230	47	88.7	113	1	100.0	166	20	100.0	139	0	0.0	0	0	0.0	0	75	92.6	
Intermediate	---	---	---	4	7.5	95	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	4	4.9	
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Total	7	100.0		53	100.0		1	100.0		20	100.0		0	0.0		0	0.0		81	100.0	

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/03				
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Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total Number of
Private Home/No Home Health	3.0	Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Residents
Private Home/With Home Health	5.4	Bathing	0.0	67.9	32.1	81
Other Nursing Homes	7.2	Dressing	3.7	77.8	18.5	81
Acute Care Hospitals	83.7	Transferring	17.3	60.5	22.2	81
Psych. Hosp.-MR/DD Facilities	0.0	Toilet Use	16.0	51.9	32.1	81
Rehabilitation Hospitals	0.0	Eating	44.4	48.1	7.4	81
Other Locations	0.6	*****				
Total Number of Admissions	166	Continence	%	Special Treatments	%	
Percent Discharges To:		Indwelling Or External Catheter	8.6	Receiving Respiratory Care		14.8
Private Home/No Home Health	7.0	Occ/Freq. Incontinent of Bladder	45.7	Receiving Tracheostomy Care		2.5
Private Home/With Home Health	38.6	Occ/Freq. Incontinent of Bowel	32.1	Receiving Suctioning		1.2
Other Nursing Homes	5.8			Receiving Ostomy Care		2.5
Acute Care Hospitals	16.4	Mobility		Receiving Tube Feeding		2.5
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	4.9	Receiving Mechanically Altered Diets		6.2
Rehabilitation Hospitals	0.0					
Other Locations	3.5	Skin Care		Other Resident Characteristics		
Deaths	28.7	With Pressure Sores	9.9	Have Advance Directives		67.9
Total Number of Discharges		With Rashes	18.5	Medications		
(Including Deaths)	171			Receiving Psychoactive Drugs		60.5

Selected Statistics: This Facility Compared to All Similar Rural Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Nonprofit Peer %	Group Ratio	Bed Size: 50-99 Peer %	Ratio	Licensure: Skilled Peer %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	90.5	86.2	1.05	83.7	1.08	84.0	1.08	87.4	1.04
Current Residents from In-County	82.7	78.8	1.05	72.8	1.14	76.2	1.09	76.7	1.08
Admissions from In-County, Still Residing	17.5	24.5	0.71	22.7	0.77	22.2	0.79	19.6	0.89
Admissions/Average Daily Census	197.6	110.9	1.78	113.6	1.74	122.3	1.62	141.3	1.40
Discharges/Average Daily Census	203.6	116.1	1.75	115.9	1.76	124.3	1.64	142.5	1.43
Discharges To Private Residence/Average Daily Census	92.9	44.0	2.11	48.0	1.94	53.4	1.74	61.6	1.51
Residents Receiving Skilled Care	95.1	94.4	1.01	94.7	1.00	94.8	1.00	88.1	1.08
Residents Aged 65 and Older	92.6	96.1	0.96	93.1	0.99	93.5	0.99	87.8	1.05
Title 19 (Medicaid) Funded Residents	65.4	68.3	0.96	67.2	0.97	69.5	0.94	65.9	0.99
Private Pay Funded Residents	24.7	22.4	1.10	21.5	1.15	19.4	1.27	21.0	1.18
Developmentally Disabled Residents	2.5	0.6	4.27	0.7	3.44	0.6	3.90	6.5	0.38
Mentally Ill Residents	18.5	36.9	0.50	39.1	0.47	36.5	0.51	33.6	0.55
General Medical Service Residents	7.4	17.2	0.43	17.2	0.43	18.8	0.39	20.6	0.36
Impaired ADL (Mean)	53.6	48.1	1.11	46.1	1.16	46.9	1.14	49.4	1.08
Psychological Problems	60.5	57.5	1.05	58.7	1.03	58.4	1.04	57.4	1.05
Nursing Care Required (Mean)	7.3	6.8	1.07	6.7	1.08	7.2	1.01	7.3	0.99